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FAX TRANSMISSION**DATE:** February 6, 2006**PTO IDENTIFIER:** Application Number 09/862,571
Patent Number**Inventor:** McGall et al.**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (571) 273-8300**FROM:** ROPES & GRAY LLP

Jesse A. Fecker, Ph.D.

PHONE: (617) 951-7633**Attorney Dkt. #:** AFMX-P02-038**PAGES (Including Cover Sheet):** 50**CONTENTS:** Amendment Transmittal Letter (1 page)
Amendment After Final Office Action Under 37 C.F.R. Section 1.116 (12 pages)
Exhibit A
Certificate of Transmission (1 page)

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Application No. (if known): 09/862,571

Attorney Docket No.: AFMX-P02-038

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Amendment Transmittal Letter (1 page)

Amendment After Final Office Action Under 37 C.F.R. Section 1.116 (12 pages)

Exhibit A

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AMENDMENT TRANSMITTAL LETTER			Docket No. AFMX-P02-038		
Application No. 09/862,571	Filing Date May 21, 2001	Examiner M. L. Borin	Art Unit 1631		
Applicant(s): McGall et al.					
Invention: METHODS FOR REDUCING NON-SPECIFIC BINDING TO AN OLIGONUCLEOTIDE ARRAY					
TO THE COMMISSIONER FOR PATENTS					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	14	- 42 =	0	x	
Independent Claims	1	- 9 =	0	x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity					
<input checked="" type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>18-1945</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 Jesse A. Fecker, Ph.D. Attorney Reg. No.: 52,883			Dated: <u>February 6, 2006</u>		
ROPES & GRAY LLP One International Place Boston, Massachusetts 02110-2624 (617) 951-7725					
I hereby certify that this correspondence is being submitted to the U.S. Patent and Trademark Office by facsimile to 571-273-8300, on the date shown below.					
Dated: <u>2/16/06</u>		Signature: <u>K. Bastarache</u> (Kathleen Bastarache)			

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